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		12(4,311)(31)	1 13 1 1 1 1 1 1 1				
Fill in this info	Fill in this information to identify your case:						
Debtor 1	Stephen F Decke	Stephen F Decker					
	First Name	Middle Name	Last Name				
Debtor 2	Andrea Decker						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY					
Case number	19-24855						
(if known)							

Check if this is an amended filing

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct y

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	635,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	45,610.98
	1c. Copy line 63, Total of all property on Schedule A/B	\$	680,610.98
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	375,859.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	36,100.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	165,096.44
	Your total liabilities	\$	577,055.44
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,113.91
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,867.74
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	hay and a	ubmit this form to

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Debtor 1 Stephen F Decker Document Page 2 of 22

Case number (if known) 19-24855

the court with your other schedules.

Andrea Decker

Debtor 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_6,313.91

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	36,100.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	58,893.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	94,993.00

	Case 19-2465	5-VFP	Doc 19 Filed 10/10/1	Page 3 i	of 22	12.10.50 Des	Civiairi
Fill in t	his information to ide	ntify your					
Debtor	1 Stephen	F Decke	er				
	First Name		Middle Name L	ast Name		-	
Debtor	71110100	Decker					
(Spouse i	f, filing) First Name		Middle Name L	ast Name			
United	States Bankruptcy Cou	rt for the:	DISTRICT OF NEW JERSEY			-	
Case n	10 = 1000						
(if known)						■ Check	if this is an
						amend	led filing
O	. I. E 400D						
Officia	al Form 106D						
Sche	edule D: Cred	ditors	Who Have Claims Se	ecured	by Propert	У	12/15
1. Do any	Yes. Fill in all of the info	I submit thi	s form to the court with your other sc	hedules. Yo	u have nothing else t	to report on this form.	Column C
			ore than one secured claim, list the creditor				
			a particular claim, list the other creditors in al order according to the creditor's name.	Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
フ 1	oyota Financial ervices		Describe the property that secures the	claim:	\$27,548.00	\$31,000.00	\$0.00
Cr	reditor's Name		2016 Lexus RX 350				
Р	ttn: Bankruptcy De o Box 8026 edar Rapids, IA 524	-	As of the date you file, the claim is: Cheapply.	eck all that			
Nu	umber, Street, City, State & Zip	Code	Unliquidated				
			☐ Disputed				
Who ov	ves the debt? Check one	Э.	Nature of lien. Check all that apply.				
Debt	or 1 only		An agreement you made (such as more	rtgage or secu	ıred		
□ Debt	or 2 only		car loan)				

Debtor 1 and Debtor 2 only

community debt

 $\hfill \square$  At least one of the debtors and another

Opened 12/18 Last Active

 $\square$  Check if this claim relates to a

Date debt was incurred 6/07/19

0001

 $\square$  Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

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Debtor '	- Copilon Conton		Case number (if known)	19-24855	
5.1.	First Name Middle N				
Debtor 2	2 Andrea Decker First Name Middle N	LactNama			
	First Name Middle N	ame Last Name			
Т	oyota Financial				
/ /	ervices	Describe the property that secures the claim:	\$3,984.00	\$0.00	\$3,984.00
	editor's Name	Co-signed vehcile.			
P	O Box 4102	As of the date you file, the claim is: Check all that apply.			
Ca	arol Stream, IL 60197	Contingent			
Nu	mber, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who ow	es the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debto	or 1 only	■ An agreement you made (such as mortgage or s	acured		
☐ Debto	=	car loan)	courcu		
	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	ist one of the debtors and another	☐ Judgment lien from a lawsuit			
	k if this claim relates to a	☐ Other (including a right to offset)			
	munity debt				
	Opened				
	04/18 Last				
Data dah	Active of was incurred 6/19/19	Last 4 digits of account number T068			
Date det	0/13/13	Last 4 digits of account number			
I T-	wete Financial				
	oyota Financial	Describe the property that secures the claim:	\$342.00	\$0.00	\$342.00
2.3 Se	oyota Financial ervices editor's Name	Describe the property that secures the claim:	\$342.00	\$0.00	\$342.00
2.3 Se	ervices	2017 Toyota Camry	\$342.00	\$0.00	\$342.00
2.3 Se	ervices	2017 Toyota Camry Vehicle is leased.	\$342.00	\$0.00	\$342.00
Cre	ervices	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that	\$342.00	\$0.00	\$342.00
Cre	ervices editor's Name  D Box 8026	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.	\$342.00	\$0.00	\$342.00
Cre PO	Prvices Editor's Name  D Box 8026 Edar Rapids, IA 52409	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  Contingent	<u>\$342.00</u>	\$0.00	\$342.00
Cre PO	ervices editor's Name  D Box 8026	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	<u>\$342.00</u>	\$0.00	\$342.00
Cre  Pro  Cre  Num	Prvices Editor's Name  D Box 8026 Edar Rapids, IA 52409	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  Contingent	\$342.00	\$0.00	\$342.00
Cre  Cre  Nui  Who ow	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	· ·	\$0.00	\$342.00
Cre  Cre  Nur  Who ow	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one.	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s	· ·	\$0.00	\$342.00
Proceedings of the control of the co	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or socar loan)	· ·	\$0.00	\$342.00
Proceedings of the control of the co	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or so car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)	· ·	\$0.00	\$342.00
Proceedings of the control of the co	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ist one of the debtors and another	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	· ·	\$0.00	\$342.00
PC Cre  Who ow  Debto Debto At lea	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or so car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)	· ·	\$0.00	\$342.00
PC Cre  Who ow  Debto Debto At lea	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another k if this claim relates to a munity debt	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	· ·	\$0.00	\$342.00
PC Cre  Who ow  Debto Debto At lea	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another k if this claim relates to a munity debt  Opened	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	· ·	\$0.00	\$342.00
PC Cre  Who ow  Debto Debto At lea	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another k if this claim relates to a munity debt  Opened 08/16 Last	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	· ·	\$0.00	\$342.00
Proceedings of the composition o	D Box 8026 edar Rapids, IA 52409 mber, Street, City, State & Zip Code res the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another k if this claim relates to a munity debt  Opened	2017 Toyota Camry Vehicle is leased.  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	ecured	\$0.00	\$342.00

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Debtor 1	Stephen F	Decker				Case number (if known)	19-24855	
	First Name	Middle N	lame	Last Name				
Debtor 2	Andrea De	ecker						
	First Name	Middle N	lame	Last Name				
2.4 <b>We</b>	lls Fargo H	ome Mor	Describe th	e property that secures the o	claim:	\$343,985.00	\$635,000.00	\$0.00
Credi	itor's Name		168 Laur	el Court Secaucus, NJ				
Attn: Written Correspondence/Bankru ptcy Mac#2302-04e Pob 10335 Des Moines, IA 50306		07094 H	udson County					
		apply.	As of the date you file, the claim is: Check all that apply.  Contingent					
Numb	ber, Street, City, S	State & Zip Code	☐ Unliquida	ated				
Who owe	s the debt? C	heck one.	Disputed	l <b>ien.</b> Check all that apply.				
	☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or secured car loan)					
Debtor	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least	t one of the deb	otors and another	☐ Judgmer	nt lien from a lawsuit				
	if this claim re nunity debt	elates to a	Other (in	cluding a right to offset)				
Park late		Opened 02/11 Last Active			2164			
Date debt	was incurred	5/31/19	Last	4 digits of account number	2104	<u>'</u>		
Add the	dollar value of	f vour entries in (	Column A on t	his page. Write that number	here:	\$375,85	9.00	
		•		ue totals from all pages.				
	at number her	•		. •		\$375,85	9.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Ouse	13 24000 VI I	Docume Docume	ent Page 6 o	f 22	.10.00 000	o mani
Fill in this inform	mation to identify your	case:				
Debtor 1	Stephen F Decker	,				
	First Name	Middle Name	Last Name			
Debtor 2	Andrea Decker					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	inkruptcy Court for the:	DISTRICT OF NEW JER	RSEY	_		
_	19-24855					
(if known)					■ Check	if this is an
					amend	ed filing
Official Forn	n 106E/E					
		/ho Have Unsecu	red Claims			12/15
left. Attach the Cor name and case nur	ntinuation Page to this pag	ured by Property. If more space. If you have no information assecured Claims				
1. Do any credito	ors have priority unsecure	d claims against you?				
☐ No. Go to F	Part 2.	- ,				
Yes.						
2. List all of your identify what ty possible, list th	pe of claim it is. If a claim ha e claims in alphabetical orde	s. If a creditor has more than o as both priority and nonpriority or according to the creditor's na articular claim, list the other cre	amounts, list that claim he ame. If you have more tha	ere and show both priority a	and nonpriority amoun	ts. As much as
(For an explana	ation of each type of claim, s	see the instructions for this form	n in the instruction bookle	t.) Total claim	Priority amount	Nonpriority amount
2.1 Internal	I Revenue Service	Last 4 digits of	account number	\$35,000.00	\$35,000.00	\$0.00
•	reditor's Name				· · · · · · · · · · · · · · · · · · ·	· ·
PO Box		When was the o	debt incurred?		-	
	elphia, PA 19101 Street City State Zip Code	As of the date v	rou file, the claim is: Che	eck all that apply		
	d the debt? Check one.	☐ Contingent				
Debtor 1 o	only	☐ Unliquidated				
Debtor 2 o	only	☐ Disputed				
_	and Debtor 2 only		TY unsecured claim:			
_	· ·	, , , , , , , , , , , , , , , , , , ,				
	ne of the debtors and anothe	<u> </u>				
□ Check if t	this claim is for a commur	nity debt Taxes and ce	ertain other debts you owe	the government		

 $\hfill\square$  Claims for death or personal injury while you were intoxicated

Other. Specify

Is the claim subject to offset?

■ No

☐ Yes

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Debto	2 Andrea Decker	Case	number (if known)	19-24855	
2.2	New Jersey Division of Taxation	Last 4 digits of account number	\$300.00	\$300.00	\$0.00
	Priority Creditor's Name  Compliance & Enforcement -  Bankruptcy  50 Barrack St., 9th Fl.  PO Box 245	When was the debt incurred?		-	
	Trenton, NJ 08695				
	Number Street City State Zip Code	As of the date you file, the claim is: Check	all that apply		
_	/ho incurred the debt? Check one.	Contingent			
	Debtor 1 only	☐ Unliquidated			
_	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt	Taxes and certain other debts you owe the	e government		
_	the claim subject to offset?	☐ Claims for death or personal injury while y	ou were intoxicated		
	No	Other. Specify			
	Yes				
2.3	New York Dept. of Labor Priority Creditor's Name	Last 4 digits of account number	Unknown	Unknown	Unknown
	Unemployment Insurance Division PO Box 15122	When was the debt incurred?		_	
	Albany, NY 12212  Number Street City State Zip Code	As of the date you file, the claim is: Check	all that apply		
v	/ho incurred the debt? Check one.	Contingent	ан тат арру		
	Debtor 1 only	_			
	Debtor 2 only	☐ Unliquidated			
_	_	☐ Disputed			
_	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
_	At least one of the debtors and another	Domestic support obligations			
	Check if this claim is for a community debt	Taxes and certain other debts you owe the	<del>-</del>		
	the claim subject to offset?	☐ Claims for death or personal injury while y			
	■ No ] Yes	Other. Specify			
2.4	New York State Dept.	Last 4 digits of account number	\$800.00	\$800.00	\$0.00
	Priority Creditor's Name of Tax & Finance	When was the debt incurred?			
	Bankruptcy Section PO Box 5300 Albany, NY 12205			-	
	Number Street City State Zip Code	As of the date you file, the claim is: Check	all that apply		
W	/ho incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Domestic support obligations			
	Check if this claim is for a community debt the claim subject to offset?	■ Taxes and certain other debts you owe the □ Claims for death or personal injury while y	-		
	No Yes	Other. Specify			

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

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	Stephen F Decker Andrea Decker		Case number (if known)	19-24855	
	No. You have nothing to report in this part. Submit to	this form to the court with your other sch	edules.		
	Yes.				
uns tha	at all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other at 2.	aim. For each claim listed, identify what	type of claim it is. Do not list	claims already inc	luded in Part 1. If more
					Total claim
4.1	Amex	Last 4 digits of account number	9893		\$2,424.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 10/08 Last 6/11/13	t Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	Yes	Other. Specify Credit Card	i .		
4.2	Bank Of America	Last 4 digits of account number	5720		\$17,999.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 07/94 Las 6/14/19	t Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	Other. Specify Credit Card	i		

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Debtor	2 Andrea Decker		Case number (if known)	19-24855	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0892		\$3,363.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 08/04 Las 6/03/19	st Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorc	e that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar o	debts	
	Yes	Other. Specify Credit Card	I		
4.4	Capital One Na	Last 4 digits of account number	9348	_	\$9,904.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/95 Las 4/12/19	st Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorc	e that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar o	debts	
	Yes	Other. Specify Credit Card	İ		
4.5	Center for Infectious Disease	Last 4 digits of account number			\$800.00
	Nonpriority Creditor's Name 20 Prospect Ave. Hackensack, NJ 07601	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorc	e that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar o	debts	
	☐ Yes	Other. Specify			

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	Stephen F Decker Andrea Decker		Case number (if known) 19-24855	
4.6	Chase Card Services	Last 4 digits of account number	8229	\$15,036.00
F V N	Ionpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Vilmington, DE 19850 Jumber Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 08/07 Last Active 4/19/19 is: Check all that apply	
_	Who incurred the debt? Check one.  ■ Debtor 1 only	Пол		
_	Debtor 1 only  Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
_	Check if this claim is for a community	☐ Student loans		
d	lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
[	Yes	Other. Specify Credit Card	1	
	Chase Card Services Ionpriority Creditor's Name	Last 4 digits of account number	8066	\$10,187.00
<i>A</i>	Attn: Bankruptcy Po Box 15298 Vilmington, DE 19850	When was the debt incurred?	Opened 06/08 Last Active 5/01/19	
	lumber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
V	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\operatorname{\beth}$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
-	lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
ı	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	1	
4.8		Last 4 digits of account number	1832	\$14,189.00
<i>F</i> E F	Ionpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 08/95 Last Active 5/16/19	
	St Louis, MO 63179  Jumber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
V	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
[	Yes	Other. Specify Credit Card	1	

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	1 Stephen F Decker 2 Andrea Decker		Case number (if known) 19-24855	
4.9	Citibank	Last 4 digits of account number	6222	\$10,584.00
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim	Opened 03/09 Last Active 7/06/19	
	Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Comenitycapital/lxvisa Nonpriority Creditor's Name	Last 4 digits of account number	5084	\$3,720.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 03/10 Last Active 6/14/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	9959	\$2,014.00
	Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 12/14 Last Active 5/26/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I	

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Debtor 1 Stephen F Decker

Debto	Andrea Decker		Case number (if known)	19-24855
4.1	Deptartment Store National Bank/Macy's	Last 4 digits of account number	0729	\$4,834.00
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 12/09 Last <i>J</i> 6/16/19	Active
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.  Debtor 1 only	-		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d alaine.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	uration agreement or divorce th	at you did not
	No	Debts to pension or profit-sharin	a plans, and other similar debt	
	☐ Yes	Other. Specify Charge Acc	count	
4.1	Deptartment Store National Bank/Macy's	Last 4 digits of account number	2030	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard	When was the debt incurred?	Opened 01/10 Last / 8/10/15	Active
	Mason, OH 45040  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce th	at you did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debt	S
	Yes	Other. Specify Charge Acc	count	
4.1	Dsnb Bloomingdales	Last 4 digits of account number	5498	\$742.00
	Nonpriority Creditor's Name Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040	When was the debt incurred?	Opened 05/16 Last A 9/13/18	Active
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	No	Debts to pension or profit-sharing	•	S
	Yes	Other. Specify Charge Acc	count	

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Debtor 1 Stephen F Decker

Debto	Andrea Decker		Case number (if known)	19-24855	
4.1	First Electronic Bank	Last 4 digits of account number	9942		\$677.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 521271 Salt Lake City, UT 84152 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 05/17 La 5/24/19	ast Active	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divor	ce that you did not	
	Is the claim subject to offset?	report as priority claims		- -4-	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card		debts	
4.1 6	Hackensack Radiology	Last 4 digits of account number		_	\$146.26
	Nonpriority Creditor's Name 30 South Newman Street Hackensack, NJ 07601	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.  ☐ Debtor 1 only				
	Debtor 2 only	☐ Contingent			
	<u> </u>	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans	u Claiii.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divor	ce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar	debts	
	Yes	Other. Specify Medical Bil	ls		
4.1	Hackensack Radiology	Last 4 digits of account number		_	\$1,059.18
	Nonpriority Creditor's Name 30 South Newman Street Hackensack, NJ 07601	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar	debts	
	☐ Yes	■ Other. Specify Medical Bil	Is		

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Debtor 1 Stephen F Decker

	2 Andrea Decker		Case number (if known)	19-24855	
4.1	Kohls/Capital One	Last 4 digits of account number	0737		\$2,664.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 06/13 Last 6/19/19	Active	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecure  ☐ Student loans	d claim:		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	,	•	
	■ No	Debts to pension or profit-sharin	· ·	DIS	
	Yes	Other. Specify Charge Ac	count		
4.1	Navient Nonpriority Creditor's Name	Last 4 digits of account number	1550	_	\$16,852.00
	Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773	When was the debt incurred?	Opened 09/15 Last 6/21/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar de	bts	
	☐Yes	☐ Other. Specify			
		Educationa	al		
4.2	Navient Nonpriority Creditor's Name	Last 4 digits of account number	6063	_	\$15,180.00
	Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773	When was the debt incurred?	Opened 10/16 Last 6/21/19	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharir	ng plans, and other similar de	bts	
	Yes	Other. Specify	.1		
		Educationa	li		

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Debtor 1 Stephen F Decker

Debt	or 2 Andrea Decker		Case number (if known) 19-2	4855
4.2 1	Navient	Last 4 digits of account number	3884	\$13,737.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773	When was the debt incurred?	Opened 09/17 Last Activ 5/17/19	e
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you	did not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	al	
4.2 2	Navient Navierit Condition Navier	Last 4 digits of account number	0753	\$13,124.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9000	When was the debt incurred?	Opened 09/18 Last Activ 5/17/19	<b>e</b>
	Wiles-Barr, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you	did not
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	al	
4.2	Syncb/care Credit Du  Nonpriority Creditor's Name	Last 4 digits of account number	8193	\$5,194.00
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 06/18 Last Activ 5/23/19	<b>e</b>
	Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Поли		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you	did not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐Yes	■ Other. Specify Credit Card	d	

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Debtor 1 Stephen F Decker

50510	Andrea Decker		Case number (if known)	19-24855	
4.2	Synchrony Bank/Lowes	Last 4 digits of account number	- 1678		\$570.00
4	Nonpriority Creditor's Name				
	Po Box 965060	When was the debt incurred?	Opened 04/13 Last 6/17/19	Active	-
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Contingent			
	Debtor 2 only				
	<u> </u>				
		•	ed claim:		
	_	• •			
	debt		paration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	-	-	
	■ No	Debts to pension or profit-shar	ing plans, and other similar de	bts	
	Yes	Other. Specify Charge Ac	count		-
	Synchrony Bank/PC Richard	Last 4 digits of account number	9755		\$97.00
			Onened 01/08 Last	Active	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 8 only Debtor 9				
					-
Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Synchrony Bank/PC Richard Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Debtor 1 only Check if this claim is for a community Check if this claim is for a community Debtor 1 and Debtor 2 only Check if this claim is for a community Debtor 1 subject to offset?	As of the date you file, the claim	is: Check all that apply			
	<u> </u>	_	e claim is: Check all that apply  Insecured claim:  of a separation agreement or divorce that you did not fit-sharing plans, and other similar debts  ge Account  Tumber 9755 \$97.00  Opened 01/08 Last Active 12/17/17  e claim is: Check all that apply		
		Unliquidated			
	☐ Debtor 1 and Debtor 2 only	•			
	$\square$ At least one of the debtors and another	<u>-i</u> '	ed claim:		
		_			
			paration agreement or divorce	that you did not	
		<u></u>	ing plans, and other similar de	bts	
	Yes	Other Specify Charge Ac	count		_
Part 3	List Others to Be Notified About a De	ht That You Already Listed			
i. Use to is try	this page only if you have others to be notified a ying to collect from you for a debt you owe to so more than one creditor for any of the debts tha ied for any debts in Parts 1 or 2, do not fill out of	about your bankruptcy, for a debt that omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the	collection agenc	y here. Similarly, if you
	and Address ael Harrison,Esq.	On which entry in Part 1 or Part 2 did yo Line <b>4.16</b> of ( <i>Check one</i> ):		tul Inggarira d Cl	ima
	Route 10 East		Part 1: Creditors with Priori	•	
Suite			Part 2: Creditors with Nonp	riority Unsecured	Claims
Denv	rille, NJ 07834	1			
		Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did yo			
	ael Harrison,Esq. Route 10 East		Part 1: Creditors with Priori	•	
			Part 2: Creditors with Nonp	riority Unsecured	Claims
Suite	214				
Suite	rille, NJ 07834	Last 4 digits of account number			

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

**Total Claim** 

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ebtor 2 _	Andrea D	ecker	Case no	umber (if known)	19-24855
otal	6a.	Domestic support obligations	6a.	\$	0.00
ims					
n Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	36,100.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	36,100.00
					Claim
	6f.	Student loans	6f.	\$	58,893.00
ns n Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	106,203.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	165,096.44

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Fill in this information to identify your case:				
Debtor 1	Stephen F Decker	ī		
	First Name	Middle Name	Last Name	
Debtor 2	Andrea Decker			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)	19-24855			

Check if this is an amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Dic	you pay or agree to pay someone who is N	T an attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice  Declaration, and Signature (Official Form 11)
		Dodaiaton, and Olginatare (Ollota Form 11
hat	they are true and correct.	d the summary and schedules filed with this declaration and
hat	they are true and correct.  /s/ Stephen F Decker	d the summary and schedules filed with this declaration and  X /s/ Andrea Decker
hat	they are true and correct.	d the summary and schedules filed with this declaration and

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Bank Of America 4909 Savarese Circle F11-908-01-50 Tampa, FL 33634

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Na Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cara Decker 168 Laurel Court Secaucus, NJ 07094

Center for Infectious Disease 20 Prospect Ave. Hackensack, NJ 07601

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citibank
Attn: Recovery/Centralized Bankruptcy
Po Box 790034
St Louis, MO 63179

Comenitycapital/lxvisa Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Dsnb Bloomingdales Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040

First Electronic Bank Attn: Bankruptcy Po Box 521271 Salt Lake City, UT 84152

Hackensack Radiology 30 South Newman Street Hackensack, NJ 07601

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Kohls/Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Michael Harrison, Esq. 3155 Route 10 East Suite 214 Denville, NJ 07834

Navient Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773 New Jersey Division of Taxation Compliance & Enforcement - Bankruptcy 50 Barrack St., 9th Fl. PO Box 245 Trenton, NJ 08695

New York Dept. of Labor Unemployment Insurance Division PO Box 15122 Albany, NY 12212

New York State Dept. of Tax & Finance Bankruptcy Section PO Box 5300 Albany, NY 12205

Syncb/care Credit Du Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/PC Richard Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Toyota Financial Services Attn: Bankruptcy Dept Po Box 8026 Cedar Rapids, IA 52409

Toyota Financial Services PO Box 4102 Carol Stream, IL 60197

Toyota Financial Services PO Box 8026 Cedar Rapids, IA 52409

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